and

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TRA		OSURE STATEMENT (7(c))	Docket No. 70869-0072US			
in Re	Application Of:	VERKAART				
	Serial No.	Filing Date	Examiner	Group Art Unit		
	09/857,142	06/01/2001	HAYES, MICHAEL J	3763		
Title	APPARATUS F	OR HOLDING AND OPERATING	G ONE OR MORE SYRINGES Address to:			
٠			mmissioner for Patents igton, D.C. 20231			
		37	CFR 1.97(b)			
		e filing of a request for continued of	ction on the merits, or before the matexamination under 37 CFR 1.114. CFR 1.97(c)	anning of a first Office		
2. 🗵	CFR 1.97(b), Final Action	on Disclosure Statement submitte provided that the Information Dis	d herewith is being filed after the p closure Statement is filed before the of Allowance under 37 CFR 1.311	ne mailing date of a		
	□ the stat	ement specified in 37 CFR 1.97(e) ;			
	-	OR				
	★ the fee	set forth in 37 CFR 1.17(p).				
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TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT Docket No. (Under 37 CFR 1.97(b) or 1.97(c)) 70869-0072US In Re Application: VERKAART Group Art Unit Examiner Filing Date Serial No. 3763 06/01/2001 HAYES, MICHAEL J 09/857,142 FOR HOLDING AND OPERATING ONE OR MORE SYRINGES Payment of Fee (Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p)) A check in the amount of \$180.00 is attached. ☑ The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. 50-1088 as described below. A duplicate copy of this sheet is enclosed. Charge the amount of Credit any overpayment. XCharge any additional fee required. Certificate of Transmission by Facsimile* Certificate of Mailing by First Class Mail I certify that this document and authorization to charge deposit I certify that this document and fee is being deposited account is being facsimile transmitted to the United States with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is Patent and Trademark Office (F addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231. (Date) Signature of Person Mailing Correspondence Signature Typed or Printed Name of Person Mailing Certificate Typed or Printed Name of Person Signing Certificate *This certificate may only be used if paying by deposit account. Dated: APRIL 29, 2004 CONRAD J. CLARK, REG. NO. 30,340 **CLARK & BRODY** 1750 K STREET, NW, SUITE 600 **WASHINGTON, DC 20006** PHONE: 202-835-1111 FAX: 202-835-1755 cc:

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